



STATE OF ARIZONA

DEPARTMENT OF REAL ESTATE

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SCHOOL OWNER OR ADMINISTRATOR STATEMENT OF QUALIFICATIONS

Form No. ED-106

Instructions for Completing this Form

This form is required by the Arizona Department of Real Estate ("Department") in conjunction with an application for Certificate of Approval to Operate a Real Estate School. A completed and signed form and substantiating documentation is required for each natural person or, if the applicant is an entity, each officer, director, member, manager, partner, owner, trust beneficiary holding 10% or more beneficial interest, stockholder owning 10% or more stock ("Owner"), and person exercising control of the entity ("Administrator").

A Questions & Certification of Answers ("Questionnaire", form LI-214), fingerprints on a Department-issued fingerprint card, and fingerprint-processing fee (currently \$29) is required for each Owner and Administrator before the School application can be considered complete.

Applicant Name (print): _____		Telephone: (____) _____
Residence Address: _____		
Mailing Address: _____		
Daytime Phone #: _____	Fax #: _____	Alternate Phone/Email: _____
Social Security #: _____	Date of Birth: _____	Driver's Lic. State/#: _____
I am an <input type="checkbox"/> owner of [or] <input type="checkbox"/> administrator for _____ (School Name)		

INSTRUCTIONS: Attach a separate page with the following headings: Experience, Work History, Education and Licenses/Designations. After each heading, print legibly or type the information requested. *If none, write "none" under the heading.* Before filing this application with the Department, **attach a copy** of any license, diploma, certificate or transcript cited in this application.

Experience

(1) Do you have experience operating a school? ☐ Yes ☐ No

If Yes, include the name and address of each school, name and telephone number of a school representative, your title, a description of your authority and responsibilities, and starting and ending dates.

(2) Did a school you operated close leaving students with tuition paid but classes cancelled? ☐ Yes ☐ No

If yes, attach a statement of facts including disposition of unearned tuition, steps taken to accommodate students, and the name and telephone number of an individual the Department may contact concerning the situation.

(3) Do you have experience teaching? ☐ Yes ☐ No

List your experience and provide the name and location of each school and the major content areas of the course(s) you taught, starting and ending dates, general duration of course(s) and frequency taught.

(4) Were you approved by the real estate regulatory agency in another state? ☐ Yes ☐ No

If yes, provide a detailed statement of the type of approval issued, the name of the agency that issued the approval, and starting and ending dates of the approval.

APPLICANT
NAME: _____

SCHOOL
NAME: _____

Work History

If your experience is *other than* as school operator or instructor, include a detailed work history for the preceding 10 years.

Education

List your formal education. Include the name, city and state of the school or organization awarding the degree. If not real estate related, you may wish to include a transcript.

Licenses / Designations

List real estate related licenses, certifications, or designations you currently hold. Attach a copy of certification(s) and designation(s) and, if issued by other than the Department, a copy of your license. If not stated on the copy, attach a sheet stating the type of license, certificate or designation, name of the issuing agency, date of issuance or award and expiration date.

☐ **COMPLETE AND ATTACH A LICENSE QUESTIONNAIRE** (ADRE form LI-214, rev. 8/05)

By my signature below, I, as owner or operator/administrator of the School, acknowledge and agree:

- I have reviewed and will comply with all applicable provisions of statutes and rules including, without limitation, A.R.S. §§ 32-2108, 32-2135, A.A.C. Title 4, Chapter 28, Article 4, and R4-28-101, Table 1, R4-28-301, and R4-28-502 (D), and understand that approval may be withdrawn or denied if I do not comply. I have the right to appeal such withdrawal or denial.
- I will file an application for course approval at least 30 days prior to presenting any new or substantially revised course. I cannot advertise that a course is approved or issue credit to students until and unless the Department has approved it. I cannot issue credit after approval of the course has expired.
- I will obtain instructor approval before I allow an instructor to teach a course for real estate credit on behalf of the School. I understand that instructor approval is per individual course and instructors are not given "blanket approval."
- I will maintain specified student records for five years. A.A.C. R4-28-404 (D)
- I will present, in bold face type, to each prospective student before enrolling or admitting the student, the information required under R4-28-404 (E).
- I will allow the Commissioner to investigate the credentials or actions of the School or any of its owners, administrators, directors, or instructors; to observe at any time a class submitted to the Department for approval or approved by the Department; and to examine the School's books and records used in connection with offering approved courses.

Applicant Signature: _____ Date: _____

If Applicant is Administrator and not
Owner, Signature of School Owner: _____ Date: _____

*This form is available in alternate formats by contacting the
Department's Business Services Office, 602-468-1414, ext. 160 to make your needs known.*

[Applicants DO NOT WRITE below this line]

☐ Approved, #: _____ Exp. Date: _____

☐ Denied. *[If denial is recommended, refer school application & all owner/administrator applications to supervisor.]*

ADRE Authorized Signature: _____ Date: _____